

PART B - FEE(S) TRANSMITTAL

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26875 7590 10/19/2006

Wood, Herron & Evans, LLP
 2700 Carew Tower
 441 Vine Street
 Cincinnati, OH 45202

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Laura Gokey Koehler	(Depositor's name)
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/Laura Gokey Koehler/	(Signature)
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January 19, 2007	(Date)
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/772,132	02/04/2004	Viktor Kanarov	VII/17US	4276
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TITLE OF INVENTION:

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	01/19/2007
EXAMINER	ART UNIT	CLASS-SUBCLASS				

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

2. For printing on the patent front page, list

I_Wood, Herron & Evans, LLP

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

2.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Veeco Instruments, Inc.

Woodbury, New York

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

Issue Fee

A check is enclosed.

Publication Fee (No small entity discount permitted)

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Advance Order - # of Copies _____

The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 23-3000 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Thomas W. Humphrey

Date January 19, 2007

Typed or printed name Thomas W. Humphrey

Registration No. 34,353

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